

Ohio House Behavioral Health Committee Testimony of Betsy Johnson, Policy Advisor on H.B. 249 Treatment Advocacy Center May 7, 2024

Chair Pavliga, Vice Chair White, Ranking Member Brewer, and members of the House Behavioral Health Committee, my name is Betsy Johnson, and I am a Policy Advisor for the Treatment Advocacy Center, a national non-profit organization devoted to eliminating barriers to treatment for those living with untreated severe mental illness. Thank you for the opportunity to provide testimony in support of H.B. 249. This bill is critical to ensuring that those with a history of untreated severe mental illness receive the treatment they need when they need it.

H.B. 249 would enable law enforcement and other designated professionals to intervene in instances in which a person has a history of untreated mental illness, is too ill to appreciate their need for treatment, and without treatment is likely to suffer mental deterioration. In most cases, the person is detained for an evaluation and released with an appointment to see a mental health professional. In more serious cases, the person can be held for up to 72 hours to be stabilized. If additional hospitalization is deemed necessary, the treatment team will encourage the person to voluntarily accept hospitalization. Only in a small fraction of cases is it necessary to civilly commit someone who has been held for emergency hospitalization. In all such instances, there is a full hearing with all the built-in due process safeguards to protect the rights and liberties of the respondent.

HB. 249 recognizes the fact that allowing a person to slip further and further into psychosis without intervening is, in fact, dangerous to that individual. Research shows that the longer an individual experiences untreated psychosis, the longer it will take them to emerge from it, and the less likely the person is to make a full recovery. Stabilizing the person quicker means less disruption to their lives and reduces the chances of them losing their job or housing.

Additionally, it is important to acknowledge that individuals with severe mental illness are disproportionately represented in the criminal justice system in Ohio and across the country. One of the reasons for this is because the system waits too long to get them the help they need. According to research led by Dr. E. Fuller Torrey, founder of the Treatment Advocacy Center, individuals with these illnesses are 10 times more likely to be in a jail or prison than a hospital bed. While we attempt to deflect many of these individuals from jail if their crimes are the product of illness with a wide array of diversion programs, what we really need is a medical solution. By allowing the treatment system to intervene earlier, H.B. 249 will reduce the number of individuals who end up in the criminal justice system through no fault of their own.

Finally, H.B. 249 saves money. People with severe mental illness who receive early interventions appear to be less likely to require hospitalization in the future than those who do not. Early interventions, whether conducted in outpatient or inpatient settings, have been shown to reduce the frequency of hospitalization, rehospitalization, and duration of hospitalization among people with severe mental illness.

Contrary to claims that expanding civil commitment criteria will lead to state hospitals becoming overwhelmed, states with psychiatric deterioration standards do not have significantly higher state hospital admission rates than those with no psychiatric deterioration standards, according to data from the *SAMHSA Uniform Reporting System 2020 State Mental Health Measures* and *Treatment Advocacy Center's Grading the States: An Analysis of U.S. Psychiatric Treatment Laws*. [In 2020, the median state hospital adult admission rate was 0.64 among states with psychiatric deterioration criteria and was 0.73 among states with no psychiatric deterioration criteria. The difference between these admission rates was not statistically significant (p=0.8).]

Please pass H.B. 249. It will allow those living with untreated severe mental illness who lack insight into their illness and have a history of non-engagement with treatment receive needed care sooner, thereby lessening damage to their brain. And it will help avoid lengthy hospital stays or time in jail and save taxpayer dollars.